

SLUT

Work Order ID 85836>

June-15-12 1:35:07 PM

Item ID: D2939-1

**Revision ID:**

**Item Name:** Saddle LH In, 206

**Start Date:** 15/06/2012

Required Date: 29/06/2012 Reg'd Qty: 690

**Required Date:** 29/06/2012    **Req'd Qty:** 600    **\*6\***

**Required Date:** 29/06/2012    **Req'd Qty:** 600    **\*6\***

## **Reference:**

Approvals: Process Plan: MLW

Accepted

\*85836\*

\*N900040100\*

Se

14

\*NS1\*

Ste

\*NS2\*

**Cust Item ID:**

**Customer:**

### Run Start

\*NR1\*

Ste

\*NDB3\*

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DOA: *John*Date: *12/08/17*QA Closed: *PD*Date: *12/08/20*

Work Order:	<b>85836-2</b>			DISPOSITION	AGAINST DEPARTMENT/PROCESS					
Part No.	<b>D2939-1</b>			Rework <input type="checkbox"/> Scrap <input checked="" type="checkbox"/> <i>X</i> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input checked="" type="checkbox"/> <i>X</i> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>		
NCR No.	<b>12-1697.</b>									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data	<i>12.07.23</i>	100	1	AFTER MACHINING SADDLE GROOVE, THE SADDLE DOESN'T SIT CORRECTLY ON SKIDTUBE. DEPTH OF GROOVE IS UN EVEN.  PROBLEM LIKELY DUE TO UNEVEN WALL THICKNESS PRIOR TO MACHINING GROOVE.	<i>DAS 16 8-09 05/04/21 12/07/23</i>	<i>SCRAP. 4 12.07.23</i>	<i>JT 120814</i>	<i>DAS 16 8-09 12/07/25</i>	<i>DAS 16 8-09 12/07/25</i>	

## FAULT CATEGORY

Landing Gear	General			
Bending	Bend		Ovalized	Pressure/Forced
Centre Not Concentric to O/S	BOM/Route		<input checked="" type="checkbox"/> Over/Under tolerance	Temperature/Cure
Cracks	Broken/Damaged		Part Incorrect	Weld
Crushed/Crimped.	Burrs		Part Lost/Missing	Wrong Stock Pulled
Cuffs	Contamination		<input checked="" type="checkbox"/> Part Moved	
Heat Treat	Countersink		Positioned Wrong	
Inspection Strip in Tube	Cut Too Short		Power Loss/Surge	Other
Ripples in Bend	Drill Holes			
Torque Waves in Extrusion	Drawing			
Turning Sequence	Finish			
Wave/Twist in Tube	Folio			

Work Order ID: 85836

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\*85836\*

Page 2

Item ID: D2939-1

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Item Name: Saddle LH In, 206

Stop

\*NS2\*

Start Date: 15/06/2012 Start Qty: 6.00

\*6\*

Cust Item ID:

Required Date: 29/06/2012 Req'd Qty: 6.00

\*6\*

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

130

QC8- Inspect parts - second check

0.00

\*130\*

QC

Quality Control

140

Chemical Conversion Coat per QSI005 4.1

0.00

\*140\*

HandFinish

Hand Finishing

150

White Gloss(Ref:4.3.5.1) per QSI005 4.3-Alum

0.00

\*150\*

Powdercoat

Powder Coating

Memo

0.00

START TIME: \_\_\_\_\_ OVEN TEMPERATURE:  
FINISH TIME: \_\_\_\_\_

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____ Part No. _____ NCR No. _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio							
				<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge							
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled							
				<input type="checkbox"/> Other							

Work Order ID 85836

June-15-12 1:35:07 PM

\*85836\*

Page 3

Item ID: D2939-1

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Item Name: Saddle LH In, 206

Stop

\*NS2\*

Start Date: 15/06/2012 Start Qty: 6.00

\*6\*

Cust Item ID:

Required Date: 29/06/2012 Req'd Qty: 6.00

\*6\*

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

160

QC3- Inspect Part Finish

0.00

\*160\*

QC

Quality Control

Memo

0.00

170

Identify as per dwg & Stock Location: \_\_\_\_\_

0.00

\*170\*

Packaging

Memo

0.00

Packaging

180

QC21- Final Inspection - Work Order Release

0.00

\*180\*

QC

Quality Control

Memo

0.00

1/208-15

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other							

**Picklist Print**

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Page 1

Work Order ID: 85836

Parent Item: D2939-1

Parent Item Name: Saddle LH In, 206

**\*85836\***  
**\*D2939-1\***

Start Date: 15/06/2012

Start Qty: 6.00

Required Date: 29/06/2012

Required Qty: 6.00

**Comments:** IPP: B00.06.26New DWG rev (mpp 2069)EC  
IPP Rev:C As per Rev C 07-03-19 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D6101-001  <b>*D6101-001*</b> Saddle Billet		Manufactured	No			100	Each	97.0000	1	6	**	10	12/07/06

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
MAT040	93	
69677	2	
76836	1	
→ 81923	50	
85433	40	
MAT042	4	
83309	4	

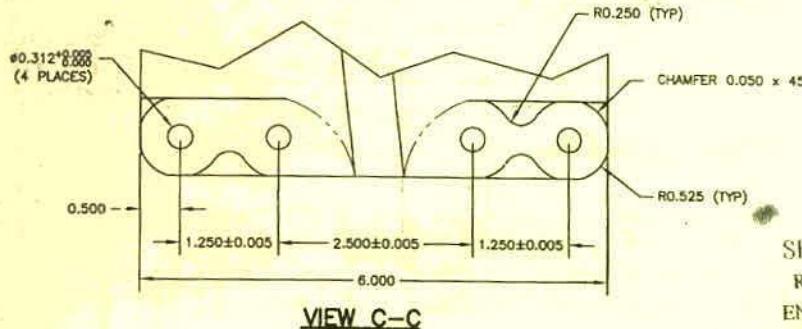
NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other				
Part No. _____ NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other							

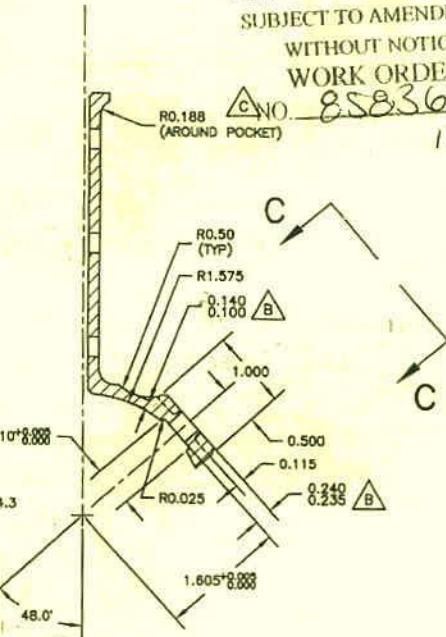


VIEW C-C

D2939-1 LH SADDLE (SHOWN)  
D2939-2 RH SADDLE (OPPOSITE)

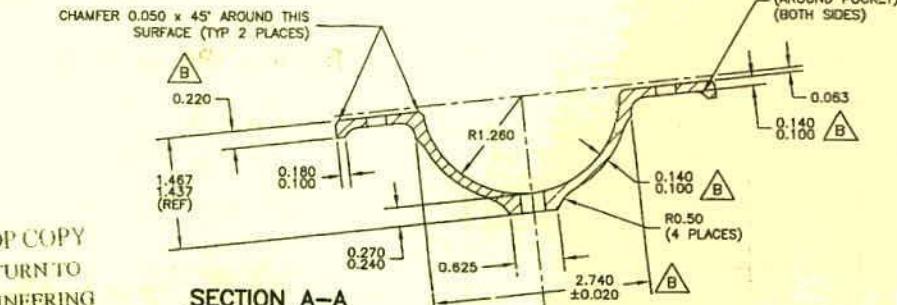
NOTES:

- MATERIAL: ALUMINUM 7075-T7351 (QQ-A-250/12)  
(MAKE FROM D6101-001 SADDLE BILLET, 7075)
- FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
POWDER COAT GLOSS WHITE (REF 4.3.5.1) PER DART QSI 005 4.3
- BREAK ALL SHARP EDGES 0.010 TO 0.020
- TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED
- ALL DIMENSIONS ARE INCHES
- ENGRAVE PART AND BATCH NUMBER IN THIS AREA 0.010 TO 0.015 DEEP



SECTION B-B

07-02-12

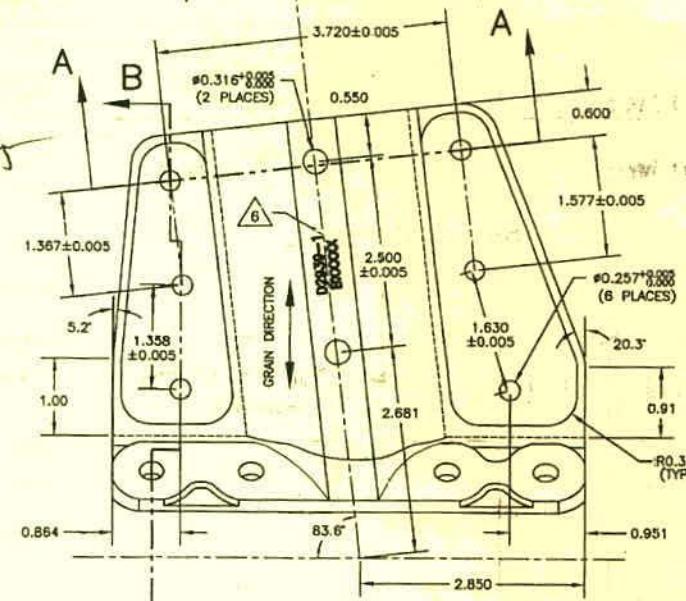


SECTION A-A

SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER

85836 MLJ

12/06/15



B

C	06.11.09	R0.188 WAS R0.30 TO R0.25
B	00.05.29	CHANGED DEOMETRY AND MATERIAL
A	99.11.12	NEW ISSUE

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THAT IT IS NOT TO BE USED FOR ANY PURPOSE  
OR COPIED OR COMMUNICATED TO ANY OTHER  
PERSON WITHOUT WRITTEN PERMISSION FROM  
DART AEROSPACE USA, INC.

DESIGN	DRAWN BY	DART AEROSPACE USA, INC. BELLEVUE, WA
PH	CB	
APPROVED		DRAWING NO. D2939
DATE 06.11.09		REV. C SHEET 1 OF 1 SCALE SADDLE INSIDE 2-3

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other						

DART AEROSPACE LTD	Work Order:	85836
Description: 206 Saddle, Inboard, Left side	Part Number:	D2939-1
Inspection Dwg: D2939 Rev. C		Page 1 of 1

Inspect dimensions highlighted on inspection sheet drawing D2939 Rev. C and record below:

				Recorded Actual Dimensions					
Dim	Min	Max	Go/No Go Gauge	1	1/2	2/3	3/4	By	Date
A	0.100	0.140			.120	.118	.120		
B	0.100	0.140			.122	.121	.120		
C	0.100	0.140			.118	.123	.118		
D	0.210	0.230			.222	.226	.222		
E	1.245	1.255			1.250	1.248	1.252		
F	1.245	1.255			1.249	1.250	1.252		
G	2.495	2.505			2.500	2.500	2.500		
H	0.510	0.515			.511	.511	.511		
I	1.572	1.582			1.578	1.578	1.578		
J	2.495	2.505			2.490	2.490	2.490		
K	0.257	0.262			.257	.258	.258		
L	0.312	0.317			.314	.314	.314		
M	0.235	0.240			.235	.235	.235		
N	0.100	0.140			.116	.117	.117		
O	0.540	0.560			.546	.546	.548		
P	0.490	0.510			.499	.498	.500		
Q	3.715	3.725			3.716	3.718	3.716		
R	2.720	2.760			2.741	2.739	2.742		
S	0.240	0.270			.256	.257	.257		
T	0.100	0.180			.133	.134	.133		
U	1.625	1.635			1.628	1.629	1.628		
V	1.362	1.372			1.361	1.368	1.367		
W	0.316	0.321			.316	.316	.316		
X	1.250	1.270		1.258	1.258	1.258	1.261		
Y	1.565	1.585	DT8695 A/B	1.574	1.574	1.574	1.573		
Z	0.178	0.198			.188	.188	.188		
AA									
AB									
AC									
AD									
AE									
AF									
AG									
AH									
Accept/Reject									

Measured by:	25	Audited by:	
Date:	12 07 17	Date:	

Rev	Date	Change	Revised by	Approved
A		New Issue	RF	
B	02.12.12	Reformat; Added Dim. X-Y, DT8683, DT8686, DT8690 & DT8695 A/B	KJ/RF	
C	07.03.21	Revised per drawing revision C	KJ/JLM	SPD

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
Part No. _____			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
NCR No. _____			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data <input type="checkbox"/> Equip/Tooling <input type="checkbox"/> Operator <input type="checkbox"/> Material <input type="checkbox"/> Setup <input type="checkbox"/> Other <input type="checkbox"/> Process <input type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear				General							
<input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio							
				<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge							
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other							
<hr/> <hr/> <hr/> <hr/>											

DART AEROSPACE LTD	Work Order:	85836
Description: 206 Saddle, Inboard, Left side	Part Number:	D2939-1
Inspection Dwg: D2939 Rev. C		Page 1 of 1

Inspect dimensions highlighted on inspection sheet drawing D2939 Rev. C and record below:

Dim	Min	Max	Go/No Go Gauge	Recorded Actual Dimensions				By	Date
				4x	5x	6x	7x		
A	0.100	0.140		.117	.120	.119	.119		
B	0.100	0.140		.120	.121	.120	.121		
C	0.100	0.140		.172	.170	.170	.176		
D	0.210	0.230		.222	.225	.221	.225		
E	1.245	1.255		1.250	1.250	1.250	1.250		
F	1.245	1.255		1.250	1.250	1.250	1.250		
G	2.495	2.505		2.500	2.500	2.500	2.500		
H	0.510	0.515		.512	.512	.512	.512		
I	1.572	1.582		1.579	1.577	1.577	1.577		
J	2.495	2.505		2.500	2.500	2.500	2.500		
K	0.257	0.262		.256	.258	.258	.258		
L	0.312	0.317		.314	.314	.314	.314		
M	0.235	0.240		.236	.239	.235	.238		
N	0.100	0.140		.117	.116	.116	.119		
O	0.540	0.560		.548	.549	.547	.547		
P	0.490	0.510		.498	.498	.502	.501		
Q	3.715	3.725		3.720	3.720	3.720	3.720		
R	2.720	2.760		2.741	2.742	2.742	2.742		
S	0.240	0.270		.256	.260	.258	.258		
T	0.100	0.180		.136	.136	.135	.135		
U	1.625	1.635		1.630	1.630	1.630	1.630		
V	1.362	1.372		1.367	1.367	1.367	1.367		
W	0.316	0.321		.316	.316	.316	.316		
X	1.250	1.270		1.259	1.256	1.260	1.260		
Y	1.565	1.585	DT8695 A/B	1.574	1.569	1.570	1.574		
Z	0.178	0.198		.188	.188	.186	.186		
AA									
AB									
AC									
AD									
AE									
AF									
AG									
AH									
Accept/Reject									

Measured by:	<i>RS</i>	Audited by:	
Date:	12-07-18	Date:	

Rev	Date	Change	Revised by	Approved
A		New Issue	RF	
B	02.12.12	Reformat; Added Dim. X-Y, DT8683, DT8686, DT8690 & DT8695 A/B	KJ/RF	
C	07.03.21	Revised per drawing revision C	KJ/JLM <i>RF</i>	<i>Shy</i>

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced			
Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure			
Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld			
Crushed/Crimped.	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled			
Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>				
Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>				
Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>				
Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset	<input type="checkbox"/>	Other	<input type="checkbox"/>				
Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>				
Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>				
Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>		<input type="checkbox"/>				

DART AEROSPACE LTD	Work Order:	85836
Description: 206 Saddle, Inboard, Left side	Part Number:	D2939-1
Inspection Dwg: D2939 Rev. C		Page 1 of 1

Inspect dimensions highlighted on inspection sheet drawing D2939 Rev. C and record below:

				Recorded Actual Dimensions					
Dim	Min	Max	Go/No Go Gauge	84	92	102	4	By	Date
A	0.100	0.140		.112	.112	.119			
B	0.100	0.140		.123	.120	.119			
C	0.100	0.140		.119	.126	.128			
D	0.210	0.230		.224	.224	.223			
E	1.245	1.255		1.250	1.250	1.250			
F	1.245	1.255		1.250	1.250	1.250			
G	2.495	2.505		2.500	2.500	2.500			
H	0.510	0.515		.512	.512	.512			
I	1.572	1.582		1.577	1.577	1.577			
J	2.495	2.505		2.500	2.500	2.500			
K	0.257	0.262		.258	.258	.258			
L	0.312	0.317		.314	.314	.314			
M	0.235	0.240		.238	.238	.238			
N	0.100	0.140		.116	.116	.117			
O	0.540	0.560		.549	.550	.548			
P	0.490	0.510		.500	.500	.500			
Q	3.715	3.725		3.720	3.720	3.720			
R	2.720	2.760		2.740	2.740	2.740			
S	0.240	0.270		.256	.255	.255			
T	0.100	0.180		.137	.138	.136			
U	1.625	1.635		1.625	1.625	1.625			
V	1.362	1.372		1.362	1.362	1.362			
W	0.316	0.321		.316	.316	.316			
X	1.250	1.270		1.258	1.258	1.261			
Y	1.565	1.585	DT8695 A/B	1.571	1.573	1.580			
Z	0.178	0.198		.188	.188	.188			
AA									
AB									
AC									
AD									
AE									
AF									
AG									
AH									

Accept/Reject

Measured by:	JT	Audited by:	
Date:	12-07-18	Date:	

Rev	Date	Change	Revised by	Approved
A		New Issue	RF	
B	02.12.12	Reformat; Added Dim. X-Y, DT8683, DT8686, DT8690 & DT8695 A/B	KJ/RF	
C	07.03.21	Revised per drawing revision C	KJ/JLM	

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	
			Work Order Update <input type="checkbox"/>			Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>	
						Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Other <input type="checkbox"/>	
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance			Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
	Bending	<input type="checkbox"/>	Centre Not Concentric to O/S	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced
	Cracks	<input type="checkbox"/>		<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure
	Crushed/Crimped.	<input type="checkbox"/>		<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld
	Cuffs	<input type="checkbox"/>		<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled
	Heat Treat	<input type="checkbox"/>		<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>	
	Inspection Strip in Tube	<input type="checkbox"/>		<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>	
	Ripples in Bend	<input type="checkbox"/>		<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>	
	Torque Waves in Extrusion	<input type="checkbox"/>		<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset	<input type="checkbox"/>		<input type="checkbox"/>	Other
	Turning Sequence	<input type="checkbox"/>		<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>	
	Wave/Twist in Tube	<input type="checkbox"/>		<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>	
		<input type="checkbox"/>		<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>		<input type="checkbox"/>	